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Total Number of Pages in This Submission

Application Number	10/812,731-Conf. #4547
Filing Date	March 30, 2004
First Named Inventor	C.C. Liew
Art Unit	1634
Examiner Name	J. C. Switzer
Total Number of Pages in This Submission	2055P(204231)

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature	<i>Amy DeClouy 54849 for</i> <i>Amy DeClouy</i>		
Printed name	Kathleen Williams		
Date	July 2, 2007	Reg. No.	34,380



JUL 02 2007

AMENDMENT TRANSMITTAL LETTER				Docket No. 2055P(204231)	
Application No. 10/812,731-Conf. #4547		Filing Date March 30, 2004		Examiner J. C. Switzer	Art Unit 1634
Applicant(s): C.C. Liew et al.					
Invention: METHOD FOR THE DETECTION OF SCHIZOPHRENIA RELATED GENE TRANSCRIPTS IN BLOOD					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	25	- 81 =	0	x 25.00	0.00
Independent Claims	8	- 32 =	0	x 100.00	0.00
Multiple Dependent Claims (check if applicable) <input checked="" type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
<i>Amy DeCloux</i> <i>Amy DeCloux 54849 for</i> Kathleen Williams Attorney/Agent Reg. No.: 34,380			Dated: <u>July 2, 2007</u>		
EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (617) 439-4444					